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AN ADDRESS

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[Delivered to the Graduating Class at the Massachusetts Medical College, March 8th, 1865.]

GENTLEMEN,—I am not insensible to the kindness of those who have asked me to address a word of good cheer to the young men leaving this school at the present time. They could not have expected from me any words bearing directly upon the details of the medical art, and cannot be disappointed if I confine myself to general views, and to such parts of the subject as are open to all observers.

You, gentlemen, have chosen your profession; inspire yourselves to perform with zeal and honor its duties, by taking first of all a just view of its dignity and usefulness. Your teachers, and other venerated masters in the art of healing, have given you and will yet give you practical directions and instruction in the detail of your duties; I can only hope, by the thoughts which I bring to your remembrance, to inspire in you some new sense of the value of those duties and of their dignity. No man can do well any work unless he does it from high motives and with a lofty spirit. No man can adorn a profession until he first honors it by feeling that it honors him.

Now the medical profession is honorable, and bestows dignity upon him who pursues it conscientiously. It lays under contribution all the physical sciences from the lowest to the highest, and requires no small aid from philosophy and theology also. It offers great opportunities of usefulness, and appeals to the noblest motives in the heart of its professor.

The final cause of the creation of this planet is, as far as man can see, to afford a school for man's education and a theatre for his action. To this end the lessons of creation are arrayed in progressive series, and the fundamental ideas are embodied with various degrees of fulness in various beings. The creation has thus appeared to some minds almost tentative in its form. Thus in a ge-

nus of plants, or of animals, we have the fundamental idea of the genus repeated sometimes in a hundred or even more species, as though the Creator had endeavored to set forth the idea of the genus in one species, but had been dissatisfied with his work and therefore tried to do better again and again. The explanation of this apparently tentative process is perhaps found in the remark of a friend of mine, that the Creative mind manifested its thoughts in this method of finite minds in order to render those thoughts intelligible to finite minds. In Creation as in Revelation, the truth is given to us line upon line, precept upon precept. Any one idea expressed in the universe is expressed in its simplest forms and in its most complex, and also in all intermediate degrees, in order to lead us to its more complete comprehension. The idea of a vertebrate animal expressed in its fulness in MAN, your professors of anatomy have endeavored partly to expound to you, but in order to do it fully they compared man with the whole class of mammalia, and even that class with its co-classes of inferior grades. To adapt the Universe to be the text-book wherein our lessons might be found, it was necessary thus to simplify and explain with great variety of illustrations—radiates, mollusks, articulates, fishes, selachians, batrachians, birds, mammals, each in their thousand forms, constitute pages in the anatomical text book of Nature.

In like manner for a full development of the idea of life, and of the normal functions of the body, it was necessary to introduce disease. Everything that our human minds can know they know partly by contrasts with its opposites. Everything which is capable of excellence must be capable also of defects or of positive vice. Thus, even in geometry (and I hold that geometry, the science of space, may be legitimately used to illustrate any and every phenomenon which occupies space), the circle and the ellipse are more perfectly known by contrasting them with mere approximations to the perfect forms. The orbits of the planets are not actually ellipses, but only would be such were there no retardation by the ether, no perturbations by comets, or by fellow planets, or by satellites, or by any other cause. This approximation to the ellipse calls our attention to every point in the ideal curve, and by its very variations from the form calls our attention more emphatically to the distinguishing of the ideal perfection from the actual imperfection. Thus, also, the forms of crystals are not absolutely those of theory, but only approximations thereto. The leaves of plants, in their wonderful phyllotaxis, do not actually fulfil, but only suggest the arrangement of perfect beauty and exact equity which would give each leaf an equal access to the sky. No two leaves, even, of one plant can be readily found which will fulfil the same type in the same manner. Yet how distinct our ideal of a maple or an elm leaf, a leaf of digitalis or of cassia! The variations between individual leaves of each species, endless as they are, do not confuse us as to the specific type, but

only point out to us more emphatically what the type is, and how individual peculiarities differ from specific differences. Even a child sees the pigeon in every one of its disguises, and recognizes the unity in the most diverse breeds of dogs. A botanist, in like manner, soon acquires a marvellous detective facility with the Protean forms of certain plants, so that at last not even the vagaries of lichens and fungi can mislead him.

Nor can an invariable standard of health be found in the vegetable world. The mighty redwoods of California have sustained themselves a thousand years; but meanwhile what generations of ordinary trees, even in the wild forests, have died, smothered by more vigorous neighbors, or having exhausted the soil, or being overpowered by insects, or by parasites, or by fungi beginning in an unsound spot and spreading over all.

What wonder, therefore, since the universal plan of nature is a partial and not perfect embodiment of ideas, what wonder that the animal frame and the human frame itself was made subject to imperfections of various sorts, producing pain and disease and death—the most certain of all methods to lead the human mind to study the human frame, and make the laws of its action a matter of special research. Looking only to the intellectual needs of man, it was necessary, in order that we might be led to study the wondrous original text-book on anatomy and physiology, to call our attention to it by sharp pains and fearful diseases, and by causing even mortal woe; it was necessary, also, to give it to us not only in innumerable editions, but, as it were, containing in the various copies every conceivable misprint, and ill adjustment of parts in both printing and binding, that we might acquire the familiarity with it in all its variations of readings, not only of students, but of correctors of the press.

This work of acquisition, gentlemen, has occupied you many happy months, and I trust will yet occupy you many years. It repays the labor of the humblest intellect, it tasks the full energies of the mightiest. The human body and its functions, in health and disease, offer numerous problems easily solved by patient attention, the solution being also of the highest value. But they offer also innumerable problems of every grade of difficulty, even up to points which we concede must be insoluble to us so long as we are in the body. In the pursuit of your chosen profession, then, you have an intellectual gymnastic, possessing the peculiar advantage claimed for rowing, that you may make it just as light and just as severe as you choose; and having, also, this great advantage over many other gymnastics—that your labors thereon are productive labors, bringing forth good for yourselves and for your fellow-men perpetually. And this intellectual training, given by the study of medicine, is not only of various degrees of severity according to your choice, but it calls into action various powers of the intellect. Your work must be founded on observation, and like all careful observation of nature, it trains

the eye and the ear and the touch, and forms the power of recognizing and interpreting indications not visible, nor audible, nor tangible to other men. There is a skill in reading and interpreting nature which faithful observers obtain that cannot possibly be gained from books or from lectures; a skill partly arising from faithful observation and partly from natural aptitude for such observation; but which is one of the most valuable of all acquisitions to the botanist, to the zoölogist, and above all to the physician; by which he sees at a glance in the plant, in the animal or in the patient that which he cannot describe in words to his student, but which the student can only learn to see by looking for himself. Your work must be based on observation—patient, careful, extensive observation. Then it demands also memory, and imagination to bring vividly your observed facts together, and suggest hypotheses for their explanation; and it requires reasoning—cautious, exact, severe reasoning—to test your hypotheses, to reject the untenable, to cling to the more probable. It requires strength of will, also, to hold the judgment in suspense when no hypothesis is tenable, and nevertheless to decide promptly, when there is need of action, which way the balance of probability inclines.

In short, gentlemen, although I speak of that which I have not pursued, to those who have begun its pursuit, I cannot but regard the studies of a faithful physician, alive to the great opportunities of his profession, as one of the finest of all modes of discipline for the understanding. Happy in your choice of a profession, you will find that a strict attention to the duties of your calling, so far from cramping your powers of thought, will enlarge your range of view and discipline every power of your mind.

And yet it will not be wise, even, for a physician to confine his studies wholly to the strict line of his profession. The healthy soul is interested in the whole range of studies presented to us in the school of life, and attains higher success in the mastery of a particular subject by keeping up a system of general exercise upon all subjects. I recently heard of an American physician, of good reputation, declaring that he was wholly unmoved at hearing of the fall of Charleston, and entirely indifferent as to the result of our great national struggle—whether the nation or the conspirators were finally triumphant; and I felt that I should be very sorry to exchange for any man's stores of medical learning or acquisitions of medical skill, my own feeling of sympathy with my nation, and of grateful acquiescence in the Divine Providence which has now caused the slaveholders' conspiracy to suffer humiliation and defeat in the very seat of its origin.

The soul is kept in health by keeping up its interest in a variety of topics; and the man whose profession requires the constant exercise of his intellectual powers, will find strength and relief in having some other study to which he can turn his mind for relaxation. One

of the wisest of your profession recommends his patients overworked by professional cares, to take off their boots in the evenings and wear slippers. The advice is good, and should be heeded by the physician himself. Let him religiously consecrate a part of every week, if possible of every day, to the neglect of his professional studies and to pursuits that will arouse the mind to a pleasant interest in something else. He will resume his boots for his daily work with the more pleasure and the more strength. The author of Florula Bostoniensis has been all the better physician for his side interest in botany and architecture; and the Songs in many Keys, frequently patriotic and devout, which have been sung by a younger professor, have not injured him as a successful student and teacher of anatomy, the science whose earliest text-book was declared by its author to be a hymn to the Creator.

But there was doubtless a higher end than the cultivation of the intellect aimed at in rendering the human frame liable to accident and to disease in its various forms, admirable as the intellectual training given to our race by nosology and therapeutics and surgery undoubtedly has been and will be. The training of the affections and of the will is of more importance than the training of the mind.

Consider, then, for a moment the moral lessons taught to the human race by the weakness and defects which render your art necessary. So far as disease can be prevented by care and foresight on the part of the individual, "what a searching preacher of self-control is the varying phenomenon of health!" So far as it can be prevented by associated action in improving the sanitary condition of the community, what a stirring preacher of reform is the pestilence that walketh at noonday! When disease and suffering admits of cure, or even alleviation, through the care of physicians and nurses, what new springs of love and gratitude well up in the heart; what new bonds of affection are formed between members of the family and between different families! And even when the evil is without remedy, what comfort to the soul even in unavailing sympathy, what deep peace in resignation to the appointments of Infinite Wisdom and Infinite Love! That Wisdom and that Love appointed our entrance into life to be through these tabernacles of the flesh, and undoubtedly awaken in us far deeper and holier affections towards each other and towards His ineffable goodness, by making us, through the weakness of the body, dependent on each other, than could be awakened were we proof against accident and against disease.

The physician is, then, the minister of God in a difficult, intellectual, moral and sacred service. He requires for that work a delicate and thorough training of the powers of observation and of the judgment; stores of knowledge in regard to anatomy and physiology, relating both to healthy and normal conditions of the body, and also in morbid states and under the influence of remedial agents, implying a knowledge also of the materia medica and of chemistry,

and even of mechanical physics; stores of knowledge also concerning the mental phenomena of sound health and of impaired powers in the brain and nervous system; he requires, in addition to this quick eye, this ready ear, this skilful touch, this varied learning, this sound judgment—he requires, I say, a sympathizing heart, a cheerful and loving spirit, a wise religious trust in God, and an unfailing tact in meeting the erroneous and extravagant demands of those who either distrust him, or, trusting him, expect of him more than lies in mortal power. Gentlemen, it is a high and honorable service, to which none but the highest and most honorable motives, I am happy to believe, usually impel a young man. And could I read and interpret to this assembly the ideals and aspirations of these young men to whom the University this day gives its sanction as worthy students of their sacred art, I doubt not that this utterance of *their* views and their purposes would make all that *I* say of the dignity and usefulness of their office seem cold and feeble.

May the love with which they give themselves to their chosen profession never grow cold; the estimate which they set upon its usefulness and dignity never be lessened. I dread nothing for a young man so much as the loss of youthful enthusiasm; the wisdom of maturer age is gained at too great a cost if it bring the loss of fervent devotion to principles and to truths, the loss of faith in the ultimate success of man, his triumph over nature, his triumph over death and time.

But the attainment of maturer wisdom is not necessarily accompanied by the loss of enthusiasm for truth and of faith in the sublime destiny of man. On the contrary, the very nature of the intellect, and of intellectual processes, leads in a healthy development of the mind ever to wider and deeper views. Is it not so? Consider a moment the tendencies of every attempt to understand the mysteries of the world about us.

No man is satisfied in his theories with what is partial and incomplete. We reach after perfection, we seek totality, unity, completeness, and if we succeed in grasping it, we immediately seek a larger whole, of which this first unity is but a part, and sweeping on with wider and deeper generalizations, end with aspiring after the infinite. The intellect thus seeks ever to comprise all facts in larger and larger formulæ. The equation of motion, formerly embracing only what was recognized as mechanical phenomena of change of place, now embraces, or so it is supposed, all the complicated phenomena of harmony and discord, of heat and cold, of light and shade and coloring, nay, perhaps also of magnetism and electricity and chemical action, and even of chemical differences; so that all that myriad-eyed science has discovered or can discover in this physical universe is the truth of the first record of inspiration that God moved upon chaos, introduced motion in its varied forms into matter, differencing THUS all elements and sending them out on their

perpetual round of varied service. And when all the phenomena of this universe are shown to be merely modes of motion, then will the insatiable imagination press reason into the service of potential physics to show in how many other modes universes might have been or may have been, or may hereafter be constructed.

But it is not the intellect only that thus seeks the infinite. Our hearts yearn for it, our deepest affections are wholly inexpressible in mortal words, and wholly unsatisfied with the approval of finite beings—the tides within us are too deep to be sounded, and rise so high that their waters mingle with the skies.

This aspiration of the intellect after the infinite is satisfied only by Theism, this yearning of the heart for it is satisfied only by Christianity; the eye is not satisfied without the sky and the horizon, which in intellectual vision are found only in God; the heart is miserable unless there be a love which answers to our deepest and most intense affections, and that love is the love of God, as manifested in the redemption of the world.

In the vision of God is alone to be found unity and so rest. The theological point of view, so far from being childish and outgrown by the maturer intellect, is the only point from which complete and correct views can be obtained. No work of human art or skill, whether to serve material uses or æsthetic ends, is properly understood unless it is looked at from the author's point of view. Nor can the grand books of creation and history be interpreted by any other canon. All the universe is the projection into external manifestation of one thought of the Deity, ever acting, according to the sublime theological conception of Maupertius, by the simplest and most economical methods to the establishment of one grand result. The necessity of taking this theological stand-point in order to attain the best results, is illustrated in the most forcible manner by this very principle of the least action. Originally conceived and propounded as a corollary from the purely Theistic conception of Infinite Wisdom and Divine Economy, it has been the fruitful source of innumerable discoveries in physics, and more recently in the hands of one of our own countrymen has remodelled social science, and converted the dismal code of despair into the oracles of hope. The simple law of attraction, exemplified in gravitation and statical electricity, must, from Maupertius's grand theological dogma, hold in every part of the universe in which it can be used. Instead, therefore, of the conflict of interests represented by the British economists as ruling in human society, we may look to find love or attraction as the ruling principle of man's nature; and men drawn together for their mutual benefit, and working, even though unconsciously, together for a common end. Under this higher aspect of social science we shall find all history illumined with a marvellous light, and all examples pointing, by sober scientific induction from innumerable facts, to a confirmation of the prophecy that mankind is ever moving forward (de-

spite the hindrances of error and of sin in people and in their rulers) to a time when poverty shall be unknown, and all men live happy in the pursuit of their own chosen and well-rewarded labor.

I was saying that the universe is doubtless the projection into external manifestation of one single thought of the Deity, ever acting by the simplest and most efficacious means to the production of one grand result. What that result may be, the successive eternities will gradually unfold, and unfold to us. For once perceive that this universe is a book, a speech, embodying the Divine thought; once admit this high Theistic statement of St. Paul that the eternal power and divine attributes of God are made intelligible to men through the medium of the outward creation, and your heart will admit the argument of the Lord, and melt under his appeal—God is not a god of the dead but of the living;—if He thus talks with us, if He thus permits us to read a part of his thoughts, it is a pledge that He will permit us to complete the investigation, it is a pledge that He has admitted us to his eternal companionship. No natural argument for the immortality of the soul can give us greater assurance than this, drawn from the fact that in the outward creation the Eternal God is talking to us and admitting us to read a part of his thoughts.

And yet it must be confessed that while the native tendencies of the soul are thus leading us ever to loftier apirations and a more generous faith, the difficulties which surround us are apt to dampen our ardor and repress our enthusiasm. The young physician, for example, finds with lengthening experience that the laws of morbid physiology are complicated, and the idiosyncrasies of patients numerously varied, and the effects of treatment uncertain—the result being modified by many known causes of unknown and variable efficiency, and by many unknown causes. He is tempted, therefore, to grow gradually sceptical in regard to all remedial agencies, and to fall back simply upon the well-established general laws of health, and upon the general principles of treatment laid down by the earliest Greek physicians—despairing of any new discoveries, and of the possibility of attaining any specific remedies, whether in the materia medica or in modes of treatment. And, so far as this tone of thought tends to a sound conservatism in judgment, it is well. I have sometimes feared, however, while looking on as a spectator, that physicians were inclined to err in the opposite direction, and failed in readiness to examine new views fairly. In all departments of science (I scarce need except even the mathematics) the student finds these two opposite dangers beset him—the lacking of a conservative spirit, and of having it in excess. On the one hand, jealous of his freedom from the authority of opinions, he may confound change with progress, novelty with importance, plausibility with truth, and thus range himself in theology with the latest heresies, in politics with revolutionists, in science with charlatans, in medicine with quacks. This seems to me now the greatest danger to our American mind. Never-

theless I have thought that among physicians there was equal danger of the opposite error; the error into which he runs who clings to established theories so firmly as to be unwilling to hear of any modification or improvement in them; who apparently thinks that all change is for the worse; all novelties, errors; all arguments brought against his opinions, sophistry; all facts which his theory does not explain, trivial; and who therefore drifts with dead wood back into past ages.

But if this is in any degree the temper of the medical profession at the present day, it is not a necessary effect of medical studies, since they furnish in themselves admirable training for the intellect and for the heart. To those forewarned of a danger so easily avoided as this, the danger scarcely exists. I will have faith, therefore, that those who have pursued their preparatory studies in these halls will ever keep an open mind; not open for the entertaining of every stray fancy and whim, either of their own or of other men's devising, which may chance to have some fascination about it; but open for the fair trial of every hypothesis which can bring unquestionable facts to sustain its probability and to promise the feasibility of proving or disproving it. I have faith that they have here learned at least one lesson; that the only true text-book is the creation itself, written for our instruction by the All-wise Teacher, and certain to reward the man who diligently studies any one of its pages. I have faith that they have formed here at least one right method—that of listening devoutly for the word of truth spoken in nature itself; and that they have caught, also, something of the generous spirit of sympathy with suffering, something of the glorious spirit of self-sacrifice for others. When I say self-sacrifice, I of course do not mean to applaud the man who destroys his own health needlessly, or who cuts short his power of fifty years usefulness by the vain attempt to do the fifty years' work in five. The physician must heed the proverb and take care for his own health. But he that desires the office of a physician desires no post of ease and idleness. Labors and dangers, anxieties and cares are his, such as few other men can justly appreciate. It is true that to one who is rightly qualified for the work there are compensations also in the gratitude and affection of those whom he serves, and in the consciousness of right intent and useful action; but these compensations make it none the less true that the privations, difficulties, exposures, fatigue and anxieties are great; and it is difficult to conceive a man of sense choosing this profession unless he has also a large and noble heart.

The great civil war which has been raging in our country for the past four years, has put the medical profession to the proof, and both older and younger members have stood the test. The opportunities of practice in the military hospital and in the field, given to young American surgeons and physicians by this war, inaugurated by the insane followers of Calhoun, although numerous are not of the most

instructive character; and in the readiness with which young surgeons enter upon this service there is evidence only of their humanity and patriotism; humanity which leads them to devote themselves to alleviating the sufferings of those who fall in the field, or are stricken in the camp; patriotism which makes them count it a glory and a joy to undergo any fatigues and dangers if they can only comfort and aid those who are defending our republican and democratic institutions against the assaults of the infatuated aristocracy of the South. Happy in their choice of a profession, they can volunteer in this sacred struggle for freedom without being withdrawn even a single month from their chosen pursuit in life.

Yet let not those who remain at home be rashly charged with lack of patriotic zeal. The strange and awful duties of war thrust upon us in these days do not relieve us from the duties of peace. The contribution of taxes, of gifts, of sympathies from those who remain at home are as essential to the successful prosecution of the war, as the raising of volunteers or of conscripts can be. The less interruption to the usual routine of peaceful labor and regular mutual exchange of services in our country, the stronger we remain and more readily we shall recover our prosperity and usefulness in the future.

Go forth, therefore, gentlemen of the graduating class, each to your chosen field of labor, assured that wherever that field may be, you have a high and noble and beneficent work to perform, as students and interpreters of one of the most important chapters of the volume of nature, as helpers and comforters of your suffering fellow-men, and as servants of the Most High in fulfilling the evident purport and intent of His Providential leading. And may His blessing be upon your labors.

REPORT OF OPERATIONS IN THE OPHTHALMIC DEPARTMENT OF THE CITY HOSPITAL OF BOSTON,

UNDER THE CARE OF DR. WILLIAMS, FOR THE THREE MONTHS ENDING APRIL 1ST, 1865. BY JOHN W. DOOLEY, ASSISTANT.

[Communicated for the Boston Medical and Surgical Journal.]

EXTRACTION OF CATARACT, five cases. In two the upward and in three the downward section of the cornea was made. Ether was given in four cases. One of the cases belonged to the category of black cataracts, the lens being of a very dark mahogany color and extremely hard. Four of the cases were successful, and one will require a slight supplementary operation for the removal of the opaque capsule blocking up the field of the pupil.

Extraction of Cataract by scooping, seven cases. Ether was given in all, and, after upward iridectomy to facilitate access to the lens, Critchett's scoop was employed for removing the crystalline. Five cases afforded good results. One failure occurred in an eye already

extensively disorganized, and where little was hoped for from the operation—and suppuration of the cornea took place in one eye without obvious cause. The other eye of the same patient was successfully operated on.

Iridectomy in eight cases. In four it was done for the formation of an artificial pupil where the normal aperture had been closed by disease—in all of these with excellent results. In two cases of closed pupil resulting from syphilitic iritis, and in two of chronic glaucoma, the operation afforded great relief from pain, and gave rise to no inconvenience; but the condition of the retina was such that only slight improvement to vision followed its execution.

Excision of Staphyloma was done once. The patient had a most unsightly enlargement of the anterior portion of the globe, which was not merely a deformity, but, from being subject to inflammation, constituted a great annoyance. Four curved needles, armed with sutures, were passed through the cornea, from above downwards, just in front of the iris, and the whole central portion of the cornea having then been excised, the needles were drawn through and the sutures tied. No inflammation followed, and the eyeball was reduced to slightly less than its natural size, so as to allow the wearing of an artificial eye.

A SINGULAR CASE OF DEATH BY SUFFOCATION.

[Communicated for the Boston Medical and Surgical Journal.]

A CHILD, previously healthy, except a slight cough, aged five years, while playing about house suddenly coughed, when respiration seemed totally obstructed and the child died instantly.

A few hours after death I attended a *post-mortem* examination with Drs. Huse and Hamilton.

On opening the thorax, the lungs were found inflated and perfectly healthy; some slight adhesions existed between the pulmonary and costal pleuræ of the right side, which were easily broken by the finger.

The trachea was next opened by a longitudinal incision, when the larynx and glottis were found filled with a soft solid substance which took the shape of the larynx and entered the glottis like a wedge, nearly or quite a half inch in length, and evidently driven up by the force of the cough. The incision was next extended downwards, and at the bifurcation of the trachea a similar piece of the same substance was found filling the trachea and extending a little into the right bronchus, as large as a large bean.

Just below the bifurcation was a rounded mass of the same substance, enclosed by a sac or walls like an abscess, the walls in contact with both bronchi and communicating with the right by a small ulcerated opening. A sinus extended upwards and to the right,

posterior to the right bronchus, nearly two inches, terminating in a blind extremity. This sinus was perhaps as large as the bronchial tube behind which it extended, but irregular, dilated into lateral pouches. The main body of this substance was about the size of a large nutmeg. It was, in the different places, alike in color and consistence, resembling in both a piece of *soft* cheese, yellowish-white in color. It was friable, yet with a little elasticity—easily pressed into any shape with the finger or knife.

About one year ago this child had measles, accompanied by some pneumonic inflammation, but soon recovered and has been well, sprightly and active since, but, as the parents say, "she has had a cough ever since, and for the last two weeks has occasionally coughed up small pieces of this same cheesy matter." No scrofula exists in the family; the parents and the other children are healthy.

This was probably an abscess, chronic in its course, which lost its fluidity before it found exit. Most respectfully yours,

East Berkshire, Vt., March 31st, 1865. O. F. Fassett.

Reports of Medical Societies.

EXTRACTS FROM THE RECORDS OF THE BOSTON SOCIETY FOR MEDICAL IMPROVEMENT. BY FRANCIS MINOT, M.D., SECRETARY.

Feb. 27th.—*Puerperal Mania.*—Dr. J. P. Reynolds reported the following case.

Mrs. F., a woman of delicate organization, 28 years old, was confined on the 2d of September for the third time. The labor was easy and natural. Five days earlier, Mrs. F. had a severe fall from a chair on which she had been standing, coming down astride the chair, and receiving the force of the blow on the lower part of the uterine tumor. The nervous shock of this accident was severe, but without known after effects. In the week following her confinement various minor difficulties occurred; at first she required for two days the catheter, then for one or two days she could not retain her urine. This was followed by persistent annoying pain in the uterine region. The lochia disappeared on the third day; the secretion of milk was then normal. She slept very little at night. At the close of the seventh day she had a severe paroxysm of hysteria. From this, however, she recovered without active treatment. On the ninth day there supervened a maniacal attack of considerable severity, characterized by delusions, the patient seeing devils spitting fire at her, people running about the room, &c., violent headache, jactitation, frequent attempts being made to spring out of bed, and commencing convulsive movements of the muscles of the face. For many days subsequently she continued in a highly disturbed state of mind, and with very little memory. Under a highly supporting diet, and the constant administration of ether, she slowly recovered. The ether was at first given to avert an apparently impending convulsion, Dr. Reynolds believing that this would have inevitably occured but for the fact that ether was

fortunately ready in the room. It was subsequently administered whenever the patient was troubled by illusions or suffering from mental distress.

The fact of the development of well-marked mania in a patient of hysterical temperament is interesting, and the value of the ether in modifying the mental state is worthy of notice.

FEB. 27th.—*Puerperal Convulsions.*—Dr. J. P. REYNOLDS reported the case.

Mrs. M., aged 42, died in her eleventh confinement, five days after delivery. For four months preceding, she had suffered greatly from toothache of severe character, from urgent nausea, bilious vomiting and diarrhœa, with frequent headache. She was also often jaundiced. She rarely had any solid fœcal discharge during this period. There was great nervous irritability. There were also some urinary difficulties. Repeatedly urged to furnish a specimen of the urine for examination, she resisted doing so, and was unwilling to make use of the remedies from time to time suggested. Accustomed during a long residence at the South to use calomel freely, she often begged to have it, but it was not given. On the morning of the 9th of May, after a night of intense headache, she had, at seven o'clock, a severe convulsion, being reported by a neighboring physician who was summoned, nearly pulseless. Under the administration of ether she recovered in about half an hour. The urine, now examined, was highly charged with albumen. Two days later, on the 11th, at 11, AM., she was delivered, without accident, of a fœtus about seven months advanced, dead. The placenta quickly followed. She continued very restless, making great complaint of pain, not intermittent, in the region of the uterus, and of distress at the epigastrium. She had, at length, nausea and vomiting. At four, P.M., after an incident which vexed her and roused her will, a second violent convulsion occurred, from which period the urine ceased to be secreted. During the remaining five days of her life no urine entered the bladder. Her bowels were once or twice freely evacuated, but farther than this no active treatment was thought to be indicated. She could be roused to intelligence till within twenty-four hours of death. At the autopsy, both kidneys were found swollen, with evidence of recent and extreme inflammation. There was no positive sign of preëxisting disease. The other organs were healthy.

Dr. Reynolds regretted that bleeding, local and general, had not been employed, though admitting the doubt as to adequate relief being thus obtained. He urged the great importance of so managing such patients as to prevent the will being roused to resistance, believing that this often precipitated a convulsion.

MARCH 13th.—*Variolous Roseola.*—Dr. ABBOT said that he had recently seen a case of this rare eruption. It was preceded by the febrile symptoms and characteristic pain in the back which usually usher in an attack of smallpox. As the patient, a lad 16 years old, had slept for the previous week with his brother, who had recently had a mild attack of varioloid, careful search was made for any true variolous papules. Two only could be made out. They were upon the face, and were exceedingly small. The roseola appeared first on the trunk and on the right buttock and thigh, covering an irregular surface of perhaps a foot in length. It was perfectly characterized, con-

sisting of elevated, sharply-defined papules, more or less coalescent, of a rather dark red color. Had there been no suspicion of varioloid, it would have been regarded as a typical case of roseola. It is worthy of remark that the patient had been subject from infancy to occasional attacks of roseola. On the second day there was a fuller development of this eruption, together with an appearance of four more papules of varioloid on the forehead and face. These were all abortive, subsiding without becoming pustules. The general symptoms disappeared on the coming out of the roseola, and this subsided in three or four days. Dr. Abbot thought this case of special interest at the present time, on account of the prevalence of variolous disease, that physicians might be put on their guard if called to attend similar cases.

March 13th.—*Fœtal Heart heard in an unusual Situation.*—Dr. Abbot said that he had recently heard the fœtal heart in an unusual situation. The woman in whom it was heard had been eight years married without previous pregnancy, and applied for a diagnosis of her condition. The catamenia had been absent for a little more than six months. The abdomen presented the usual fulness of pregnancy of that period, but the fœtal heart could not be detected in the usual place. After very prolonged and careful examination, it was heard distinctly in the median line, three inches and a half above the umbilicus, about half way between it and the ensiform cartilage, over a surface of about two inches in diameter. It could not be heard at any other point. The outline of the abdomen at its upper part made it probable that the child was lying transversely across the upper part of the uterus.

March 13th.—*Remarkable Human Skull.*—Dr White exhibited a human skull recently removed from a burial mound near Stockton, California. It presented some remarkable anatomical points, and was evidently of a very degraded type. The frontal region was exceedingly low and narrow, and the supra-ciliary ridges massive and prominent. The zygomatic arches were very wide, and projected half an inch or more when the skull was held vertically at arm's length. The parietal and occipital regions were bulging and capacious, so that the internal capacity was 82 cubic inches. The cranium was perfectly symmetrical and had never been distorted by artificial compression, although the forehead was more retreating than skulls flattened by design. Another cranium was brought from the same mound, which, although of the female sex, presented the same general characters. Both specimens resembled the Digger type more than any other of the native races, but were even more degraded than this low tribe.

March 13th.—*Hereditary Syphilis.*—Dr. Williams asked the attention of the Society to a boy of 12 years affected with the peculiar form of interstitial inflammation of the cornea which is a consequence of inherited syphilis. The notched edge of the incisors, and dwarfed, peg-shaped aspect of the molars, with the broad and sunken bridge of the nose, thick lips, and sallow and pitted skin, so well described by Mr. Hutchinson, of London, as constituting the peculiar physiognomy of congenital syphilitic affection as observed after the period of second dentition, were well marked in this case. The treatment had consisted in the use of hydrarg. c. cretâ, combined with tonics, under which the opacity of the cornea was diminishing and vision improved.

March 13th.—*Extraordinary Voluntary Power over the Muscles of the Eyeball.*—Dr. Williams also exhibited a middle-aged man who had gradually acquired an extraordinary voluntary power over the muscles of the eyeball; so that he could rotate the eyes to and fro, in any direction, with astonishing rapidity. He had commenced these movements at eight years of age, and had obtained increased control over the muscles year by year by frequent exercise.

March 13th.—*Treatment of Acute Tonsillitis with solid Nitrate of Silver and Incisions.*—Dr. Parks said that he had been for a number of years in the habit of treating acute tonsillitis, when seen early, by applying solid nitrate of silver all over the inflamed surface. When the appearances indicate much engorgement, he also lances the gland, to the depth of half an inch, in one, two, or three places. Neither operation is so painful as might be expected. The relief which has followed, even in severe cases, has been so great, and so speedy, that he could but attribute it to the treatment. The past winter, a lady consulted him for this affection, in whom the symptoms had been present some thirty-six hours. The pulse was high, the skin hot, the countenance heavy and distressed. There were pains in the back and elsewhere; thirst, and anorexia. Swallowing was excessively painful. Both tonsils, as also the anterior pillars, were much swollen, dark red, and angry looking. The application of nitrate of silver, and also incisions, were resorted to. This was on Thursday. Friday, nitrate of silver was again applied, the symptoms being mitigated. Saturday, the patient was convalescent, when Dr. P. made his last visit. The succeeding Wednesday, the patient went into the country to visit friends. During the preceding winter, Dr. Parks had treated the same patient for this affection with similar results, and much to her surprise, as she had been long subject to occasional attacks, and never before had been convalescent under three weeks, often being ill with them longer than that. Dr. P. said it might be argued that the inflammation in these last two attacks was predestined to rapid resolution, and would have occurred without treatment. But this was only one of many similar instances, and he remembered no case of failure. He recollected one patient in particular, who said his attacks of tonsillitis usually (or always) terminated in suppuration; and in whom abscess was strongly threatened, but did not occur, free cauterization and lancing having been used. About the time he commenced this method of treatment, some years ago, he saw in the *Union Médicale* a mention of favorable results from the application of solid nitrate of silver to acutely inflamed tonsils.

Northern Dispensary, New York.—Twenty-six thousand one hundred and twenty-six patients have been treated during the year by the Northern Dispensary, in the city of New York, of whom 19,916 were cured or relieved, 96 have died, and the remainder have been sent to the hospital, discharged as improper objects, or are still under treatment. The number of prescriptions dispensed was 33,053. The receipts of the institution were $6630·31, and there is a balance on hand of $417·06.—*Med. and Surg. Reporter.*

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON: THURSDAY, MAY 4, 1865.

SUDDEN DEATH IN LABOR.—We have received two communications with reference to the case of sudden death in labor reported and commented on in the JOURNAL of the 20th ult. We have only room to notice the first this week. It is from Dr. Johnson Gardner, of Providence, R. I., as follows:—

MESSRS EDITORS,—I have read with much interest the extraordinary case you have been pleased to publish of "Sudden Death in Labor," reported by Dr. Case, of Chicago. There can be no doubt, I think, that the opinion you have given, at the solicitation of Dr. Case, as to the probable cause of this death in parturition (alike rare and unexpected, as it was instantaneous) is the most rational and philosophical that can be adduced. From what I have several times witnessed in practice, I can well conceive that powerful uterine action, so sudden as to produce congestion of the brain, immediately after the rupture of the membranes, might cause this sad result. But it never has, and I trust never will be my lot to have charge of such a case. It is suggestive of many thoughts to the reflecting accoucheur. If it be true that "physicians *generally* break the membranes as soon as the mouth of the womb is properly dilated, and the liquor amnii comes away more gradually"; and if the cause of the fatal result in this case was, as you have, I think, correctly suggested, is it not an argument in favor of giving more and increased attention as to when the proper time arrives for this artificial interference? Or, in other words, should the physician in ordinary and natural labor break the membranes? This is a question about which I confess I have had much doubt and perplexity.

Dr. Capron, now enjoying an extensive obstetric practice, and myself were both students with the late Dr. Levi Wheaton, of this city, at the same period—during the years 1823, 4, 5, now 40 years ago; since which we have kept up a professional intimacy. At one of our interviews, not more than a year since, the Doctor mentioned to me that he was in the habit of rupturing the membranes as a means of expediting labor. On this account I have of late, in some cases, been induced to adopt this course for a similar reason. But I have recently been so often disappointed, and have found it so frequently to *retard* rather than *expedite* labor, that, as a general rule, I have now abandoned it. I have, therefore, come to agree fully with Dr. Ramsbotham (page 128), where he says:—"It is desirable in practice to preserve the membranous bag entire as long as possible; or, at least, until it has performed the whole office assigned to it by nature—viz., the dilatation of the os uteri, the vagina, and somewhat of the external parts. When the membranes appear externally to the vulva, indeed, we may suppose that they have then effected all the good that can be expected of them; that their remaining entire may possibly be retarding the labor; and we may, in that case, venture to rupture

them, provided the head present. But it is one of the first axioms to be learned in obstetric practice, not officiously or unnecessarily to destroy the cyst so long as any advantage can be gained from its dilating powers."

We believe that in reality there is no difference of opinion between Dr. Gardner and ourselves on this subject. Of course, so long as the membranes, if left intact, are aiding the process of labor, they should not be ruptured. In saying that "physicians generally break the membranes as soon as the mouth of the womb is properly dilated," &c., thus preventing the explosive rupture referred to, we stated what we believed to be the common practice by the best practitioners, and in accordance with the highest obstetrical authority. All will agree with Dr. Ramsbotham that there should be no delay in doing this when the membranous bag has "performed the whole office assigned to it by nature," although we doubt if all or the majority will think it necessary to wait until the external parts are distended by it. In truth, this is a case calling for good judgment on the part of the practitioner, such as we are happy to believe belongs to the profession generally. Given a well-dilated and yielding os, a bag of membranes firmly distended and protruding into the vagina at every pain, why delay the evident assistance which rupturing the membranes must give? Is it not evident that just so much force as is expended by the uterus against the resistance of the membranes is just so much expulsive force wasted and so much time lost? True, it may be that sometimes labor may seem to be temporarily retarded; but this delay is only apparent, and is caused by the uterine contractions acting at first upon the liquor amnii and causing it to escape to some extent before they are fully brought to bear upon the fœtus itself. Let us not be misunderstood. We do not advocate the rupture so early as to cause the escape of *all* the liquor amnii before the head is fairly at the brim of the pelvis, thus exposing the child to the dangers of a "dry" labor, but only when there is no apparent obstacle to its progress. Under these circumstances a certain amount of the waters will at first pass off, and there will be sometimes a temporary cessation of the violent pains, merely because the resistance caused by the membranes has been removed and a part of the uterine contents escapes without much effort on the part of that organ. These contractions, however, will not empty the uterus wholly before the head is so engaged as to shut up the os sufficiently to prevent this dangerous condition. The whole question may be simply stated thus:—Is there reason to believe at any stage of labor that the resistance of the membranes is retarding the process? If it is, they should certainly be ruptured. Neither should the danger of allowing the uterus to exhaust itself against a tough bag of waters be lost sight of. It is laid down, we believe, by all the principal writers on obstetrics, and it commends itself to reason and common sense, that the very abrupt and sudden delivery which may then occur is very apt to be followed by uterine atony and post-partum hæmorrhage. *Naturâ duce* is the best guide for the intelligent physician in this as in all other cases.

Without making any extended search, turning to the authorities at our elbow, we find that Dewees says on this subject:—

"Should the pains be efficient, and the os uteri well dilated, or

even easily dilatable, and the membranes entire, let them be ruptured by the pressure of the finger against them, or, by cutting them with the nail of the introduced finger. We are well aware that this direction is very far from being in conformity with the opinions of writers upon this subject; but we are sure we have not adopted it upon slight grounds; nor proposed it because it might quadrate with preconceived notions. In directing it, we are certain that experience is altogether in its favor. And this should be done for the following reasons: first, because, when the mouth of the uterus is dilated, or even easily dilatable, the membranes have performed every duty they can perform; secondly, that very often the advancement of the presenting part is retarded by the strength of the membranes, and the labor much protracted by it; thirdly, that very frequently the pains are increased both in force and frequency, and the labor much abridged by it; fourthly, it gives much greater security to the woman after delivery, by permitting the tonic contraction to take place before it is accomplished, and thus ensuring a more speedy delivery of the placenta, and also very much lessening the risk of after-hæmorrhage."

Blundell says:—"If, however, the os uteri be wide open, and the membranes, pushing down along the vagina towards the external parts, have not given way, then rupture them; for, no longer of service in dilating the passages, they may retard the birth; or, should the laxity of the parts, or the capacity of the pelvis, allow of their transmission entire, floodings fatal to the mother and destructive to the fœtus may be the result."

Caseaux says:—"It is very certain that, when the uterine orifice is entirely dilated, when the membranes are forced into the vagina by a large quantity of fluid, and the head is movable, but still the contractions do not produce a spontaneous rupture of the membranes, it is evident, we repeat, that they, by their resistance, prolong the labor. Although this obstacle is never insurmountable by the efforts of nature alone, yet the delay in the delivery and the dragging on the membranes may be attended with some inconveniences, and it is, therefore, better to lacerate them."

Bedford, while stating that, as a general rule, spontaneous rupture of the membranes takes place as soon as the os is sufficiently dilated for the head to pass, advocates the essential necessity of rupturing the bag of waters when the labor is very rapid, and there is apprehension of too sudden an expulsion of the fœtus and its appendages. He says, "*you should, as a general rule, regard quick births as dangerous births.*"

We must defer to another occasion our notice of another communication on this interesting case.

Spasmodic Asthma—Value of Medical Journals. *Messrs. Editors,*—Some ten years ago, in conversing with a member of the medical profession whose success in the healing art had been below the average, he very positively and somewhat proudly affirmed that he had never subscribed for nor habitually read any medical journal. With some surprise, I inquired his reasons for ignoring such valuable means for acquiring useful information. He replied: "Medical journals are a humbug. One week there is one specific, and the next week another

discovered and blazoned forth to the medical world, but at the end of a few months they are forgotten and no one any the better for them."

Now there may be some *little* truth in this wholesale assertion, but it is mostly false. It has often seemed to me during the fourteen years that I have been in the profession, that the medical journal has providentially come to me *just in the right time*, with some wise suggestion that has smoothed the way and aided me materially in giving help to those whose lives were in my hands, so to speak. One instance I will relate. Spasmodic asthma used to be a terror to me. I had tried so many remedies and failed, that I had almost concluded that it would run its course in spite of stimulants, sedatives, anodynes, &c. Some time in January or February of a year ago, I was called to see Mrs. H. She had been awake and suffering with spasmodic asthma all night; was in the seventh month of pregnancy, which did not help the matter much. Said that she had suffered terribly with it a year before; was then visited by Prof. R., one of our most skilful physicians, but it was three days before she could get relief. It was the *first call* to that house, and I felt as though the prospect of relief was small. A few days previous I had read an article in the JOURNAL recommending hot brandy. I ordered her to take an ounce and a half in water, as *hot as she could drink it*. The second dose ended the asthma, and she went to bed and slept soundly. A number of times since I have prescribed it in similar cases with the same results. Believing it to be the duty of a physician to give the profession the benefit of his experience in any new method he may have found out in the treatment of disease that is successful, in a future article I will say something about the internal use of chloroform in convulsions of infants.

M. WENDELL CASE, M.D.

Chicago, April 24th, 1865.

MESSRS. EDITORS,—At the annual meeting of the Middlesex South District Medical Society, the following officers were elected:—*President*, Enos Hoyt. *Vice President*, Anson Hooker. *Secretary*, J. T. G. Nichols. *Treasurer*, B. F. D. Adams. *Supervisors*, L. E. Partridge, J. Pratt, H. Holmes. *Censors*, C. H. Allen, A. Hosmer, H. H. Pillsbury. *Commissioner on Trials*, W. W. Wellington. *Councillors*, H. Bigelow, H. Cowles, J. C. Dow, R. L. Hodgdon, A. P. Hooker, W. B. Morris, J. T. G. Nichols, J. L. Sullivan, J. E. Tyler, R. S. Warren, M. Wyman. *Delegates to the American Medical Association*, Josiah Bartlett, H. Bigelow, H. Cowles, A. Hosmer, Anson Hooker, Samuel Richardson, J. F. Wakefield, R. S. Warren, W. W. Wellington, M. Wyman.

J. T. G. NICHOLS, *Sec.*

Cambridge, April 27th, 1865.

TYPHUS FEVER.—This disease in its most malignant form has for a number of months been epidemic in Scotland and Ireland. At Dundee, Aberdeen, Falkirk, Glasgow, Greenock, Dublin, Cork, it has carried off hundreds, among them, we regret to say, not a few of our own profession, who contracted the disease in the course of their professional duties. As the approaching season will doubtless see a number of emigrants reaching our shores, sailing from the Clyde and Irish

ports, where the disease is now prevailing, we trust our authorities at quarantine will examine closely all vessels coming from any affected port. If the disease was to become prevalent with us, during our hot summer weather, which will soon be upon us, we would have great cause to lament our want of forethought. Prevention is better than cure.—*Canada Medical Journal.*

Anæsthesia by Chemically pure Ether.—MM. Regnauld and Advian, pharmaceutists, laid before the Imperial Academy of Medicine, Dec. 27, 1864, a work on the method of obtaining chemically pure sulphuric acid. M. Gosselin stated that at the request of MM. R. and A. he had tried their pure sulphuric ether, and found its effects far more rapid and certain than that of ordinary ether, and that the period of excitement did not occur. Four to eight minutes sufficed for the production of complete anæsthesia, and as death had been produced in a certain number of cases from the inhalation of chloroform, whilst none had resulted from ether, he thought the latter should be preferred to the former.—*Medical News*, from *Révue de Thérapeutique Méd.-Chir.*, Jan. 15th, 1865.

Death of a Surgeon from Chloroform.—An inquest has been held at Newcastle on the body of Mr. Christopher Coates Lynn, M.R.C.S., of Newcastle-upon-Tyne, who was in good practice in that place. Mr. l'Anson, who was called in to see the deceased, said that he had on two former occasions inhaled chloroform, but could not say for what purpose. There was nothing else to account for death, nor was there any reason to suppose it was taken with the intention of committing suicide. The jury returned a verdict that the deceased had died from the effects of chloroform administered by himself in error.—*London Lancet.*

VITAL STATISTICS OF BOSTON.

For the Week ending Saturday, April 29th, 1865.

DEATHS.

	Males.	Females.	Total.
Deaths during the week	42	51	93
Ave. mortality of corresponding weeks for ten years, 1853—1863,	38.9	42.0	80.9
Average corrected to increased population	00	00	89.77
Death of persons above 90	0	0	0

We have received a communication on two cases of Tænia Solium, from Dr. Francis C. Ropes, and one on Tubercular Peritonitis, from Dr. W. H. Triplett, which will receive speedy publication.

Died,—In New York city, April 26th, Dr. Valentine Mott, in his 80th year.

Deaths in Boston for the week ending Saturday noon, April 29th, 93. Males, 42—Females, 51. Accident, 2—apoplexy, 1—inflammation of the bowels, 4—congestion of the brain, 2—disease of the brain, 3—bronchitis, 3—cancer, 1—cholera infantum, 1—consumption, 23—convulsions, 2—croup, 1—diphtheria, 1—dropsy of the brain, 4—drowned, 2—erysipelas, 1—scarlet fever, 1—typhoid fever, 4—disease of the heart, 2—infantile disease, 4—inflammation of the lungs, 7—marasmus, 1—paralysis, 1—peritonitis, 2—pleurisy, 1—puerperal disease, 2—purpura hæmorrhagica, 1—scrofula, 1—smallpox, 2—suicide, 2—syphilis, 2—unknown, 8—dysentery, 1—whooping cough, 1.

Under 5 years of age, 36—between 5 and 20 years, 6—between 20 and 40 years, 25—between 40 and 60 years, 18—above 60 years, 8. Born in the United States, 63—Ireland, 26—other places, 3.